FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1272862

OMB APPROVAL									
OMB Number:	3235-0076								
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Ordinary shares
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment RECEIVED
A. BASIC IDENTIFICATION DATA
Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
Kinhua Financial Network Limited
Address of Executive Offices. Suite 2003-4, Vicwood Plaza, 199 Des Voeux Road Central 852-3196-3939
Hong Kong Address of Prinepal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)
Brief Description of Business Financial services and media company providing financial information and process unique access to the Chinese market
ype of Business Organization X Corporation Iimited partnership, already formed Other (please specify): THOMSO
Actual or Estimated Date of Incorporation or Organization: The PD X Actual Estimated Surisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS .
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 17d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be shotocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes hereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted JLOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of his notice and must be completed.
ATTENTION
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filling of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

A. BASIC IDENTIFICATION DATA
Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner 🔀 Executive Officer 🗓 Director 📋 General and/or Managing Partner
full Name (Last name first, if individual) Wu, Ji Guang
Business or Residence Address (Number and Street, City, State, Zip Code)
35/F News Building, No. 2 Shennan Middle Road, Shenzhen, People's Republic of China
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer X Director General and/or Managing Partner
Full Name (Last name first, if individual)
Bush, Loretta Fredy
Business or Residence Address (Number and Street, City, State, Zip Code)
Flat E, 49/F, Tower One, The Belcher's, 89 Pok Fu Lam Road, Hone Kone
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Pelino, Dennis Lindsay
Business or Residence Address (Number and Street, City, State, Zip Code)
1500 Ocean Drive, Suite 1201, Miami Beach, Florida, 33139, U.S.A.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Lie, Jae Young Business or Residence Address (Number and Street, City, State, Zip Code)
Room 15D, Tower 3, 1500 Huaihai Central Road, Shanghai, 200031, People's Republic o
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer X Director General and/or Managing Partner
Full Name (Last name first, if individual)
Earnshaw, Graham Anton
Business or Residence Address (Number and Street, City, State, Zip Code)
1507 Liulin Building, 1 Huaihai Zhong Lu, Shanghai, 200021, People's Republic of Ch
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Williams, John Mac Leod
Business or Residence Address (Number and Street, City, State, Zip Code)
810 Seventh Avenue, New York, NY 10019-5818, U.S.A.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Managing Partner
Full Name (Last name first, if individual)
Xue, Yong Xing
Business or Residence Address (Number and Street, City, State, Zip Code)
Xinhua News Agency Building, 5 Sharp Street West, Wanchai, Hong Kong
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
Each promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more	of a class of equity securities of the issuer
	• •
• Each executive officer and director of corporate issuers and of corporate general and managing partners of	or partnership issuers, and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Zhou, Yu	
· · · · · · · · · · · · · · · · · · ·	
Rusiness or Residence Address (Number and Street, City, State, Zip Code) Tin Tin Jia Yuan, Apartment 11D, Building 1, No. 22 An Le Lir	n Road, Chong Wen Distric
Beijing, China, Zip code 100075 Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director	General and/or
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Lau, Tin Chung Gordon	
Business or Residence Address (Number and Street, City, State, Zip Code)	
14C, Block 2, 74 Robinson Road, Hong Kong	
Check Box(es) that Apply: Promoter	General and/or
Check Box(co) (mac / pp.).	Managing Partner
Full Name (Last name first, if individual)	
Xinhua Finance Holdings Limited	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Office Chambers, P.O. Box 217, Apia, Samoa	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Kung, Yuen-Kao	
Business or Residence Address (Number and Street, City, State, Zip Code)	
11/F, No. 136 Roosevelt Road, Section 2, Taipei, Taiwan	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

				i di aggi	B. IN	FORMATI	ON ABOU	í offeri	∜ G > ,		The second		
1.	Has the	issuer sold	, or does th	e issuer in	itend to sel	I, to non-a	ceredited in	ivestors in	this offeri	ne?		Yes	No [X]
	Answer also in Appendix, Column 2, if filing under ULOE.											ن	
2.										************	\$ <u>0</u> ,	.36	
3.	Does the offering permit joint ownership of a single unit?										Yes [X]	No	
ر. 4.												ß	LJ
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, an commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a stat or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of suc a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)										ne offering. with a state			
Ful	l Name (l	Last name	first, if indi	vidual)									
Bus	siness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	ip Code)		····	··			
Naı	ne of Ass	sociated Br	oker or Dea	aler			<u>.</u>						
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	ourchasers						
	(Check	"All States	" or check	individual	States)	• • • • • • • • • • • • • • • • • • • •			·····			☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
	II.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	[X]	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful	l Name (Last name	first, if indi	vidual)	· · · · · · · · · · · · · · · · · · ·								
Bu	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
				·	·								
Na	me of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		····				
	(Check	"All States	s" or check	individual	States)			·····		· · · · · · · · · · · · · · · · · · ·		☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Fu	II Name (Last name	first, if indi	ividual)	· · · · · · · · · · · · · · · · · · ·								
	····				10	en a	71:- 0 ()						
Bu	siness or	Kesidence	: Address (N	number an	a Street, C	ny, State, I	Lip Code)						
Na	me of As	sociated Br	oker or De	aler				· · · · · · · · · · · · · · · · · · ·					
Sta	tes in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	***************************************			***********	**************		☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	TL DATE	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1,	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box x and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Amount Already
	Type of Security	Offering Price	Sold
	Debt		<u>\$</u>
	Equity	\$2,250,000	\$2,250,000
	📆 Common 🔲 Preferred	,	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	s	\$
	Other (Specify)	\$	\$
	Total	<u>\$</u>	s
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	T	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_/
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	•	,
	Transfer Agent's Fees		\$/
	Printing and Engraving Costs		s
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		<u>\$</u> /

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question I and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		s
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$	s
	Purchase of real estate] \$	
	Purchase, rental or leasing and installation of machinery and equipment]\$	
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)] s	s
	Repayment of indebtedness	1\$/	s
	Working capital	1\$	_ \$
	Other (specify):	1\$	s
			\$
	Column Totals	1	s/
	Total Payments Listed (column totals added)	 \$	
	D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	ion, upon writter	
Issu	ner (Print or Type) Signature	ate	
Χi	nhua Financial Network Limited The Land	26 March	2004
	ne of Signer (Print or Type) Title of Signer (Print or Type)		
	oretta Fredy Bush Chief Executive Officer		

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes No provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	er has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned horized person.
Issuer (F	Print or Type) Signature Date
Xinhu	a Financial Network Limited Treduction 26 March 2004
Name (P	rint or Type) Tiple (Print or Type)
Loret	ta Fredy Bush Chief Executive Officer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				Al	PPENDIX					
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Ordinary shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK				·						
AZ				,						
AR										
СА		X	\$0.36/share	3	\$118,811	.90				
со										
СТ		X	\$0.36/share	3	\$19,688.	83				
DE										
DC		X	\$0.36/share	4	\$34,322.	50				
FL										
GA										
НІ							!			
ID										
IL		X	\$0.36/share	2	\$5,318.2	5	i .		_	
IN										
IA										
KS	i						l			
KY										
LA						·				
ME										
MD		X	\$0.36/share	2	\$9,052.3	4				
MA										
Ml										
MN										
MS										

				APP	PENDIX					
1	Intenc	2 I to sell ccredited	Type of security and aggregate offering price		4 Type of investor and			5 Disqualification under State ULOE (if yes, attach		
	investor	s in State -Item 1)	offered in state (Part C-Item 1)		amount pu	rchased in State : C-Item 2)		explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Ordinary shares	Number of Accredited Investors	redited Non-Accredited			Yes	No	
МО										
МТ										
NE										
NV		X	\$0.36/share	11	\$1,051	,935.45				
NH										
NJ		X	\$0.36/share	. 6	\$120,62	2.37				
NM	i									
NY		X	\$0.36/share	24	\$599,97	1.13				
NC		X	\$0.36/share	1	\$97,061	.18				
ND										
ОН							·			
ок										
OR										
PA		X	\$0.36/share	1	\$1,131.	54				
RI										
SC								<u></u>	_	
SD										
TN										
TX							<u></u>			
UT							 	-		
VT										

\$47,524.76

\$0.36/share

VA

WA WV

WI

		in diament		APPI	ENDIX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									